

Planning a Permanent Move?

Once you have established a new permanent residence, ensure your DEERS information is current.

If TRICARE Prime is available in the new area, complete an enrollment application to transfer your enrollment.

If TRICARE Prime is not available, you must disenroll when you reach your destination.

For options in your new area call **1-800-931-9501** or go to **www.tricare.osd.mil/tricare/trimap2.html**.

Family Members Moving for More than 30 Days

If your family plans a temporary move:

- ★ If TRICARE Prime is available at the temporary location, you must transfer the TRICARE Prime enrollment.
- ★ If TRICARE Prime is not available, disenroll from TRICARE Prime upon arrival and use the TRICARE Standard option.
- ★ Contact the TRICARE Service Center at 1-800-931-9501 for the number to the TRICARE Service Center where you are temporarily located.



**TRICARE Prime Enrollees
Out-of-Area Care
Quick Reference Card**

TRICARE Prime health care begins with your Primary Care Manager. The Primary Care Manager is identified on the front of your TRICARE Prime enrollment card along with the phone number.

Remember to verify your DEERS information and keep it current. DEERS can be verified and updated at the nearest Military Personnel Office or online at

<https://www.tricare.osd.mil/DEERSAddress/>; or call 800-538-9552.

Important Note: Update your DEERS to reflect changes in family status or change of address. Keeping your DEERS information updated will ensure your eligibility status and proper claims processing.

Traveling Out of Area

Emergencies: Dial 911 or go to the nearest hospital emergency room. An authorization is not required, but you should contact a Health Care Finder afterwards at 1-800-931-9501.

Non-Emergency Care - All non-emergency care requires an authorization. Contact the Health Care Finder at 1-800-931-9501. All claims will process under point of service if an authorization has not been issued. Under point of service you will incur a \$300 deductible per person, \$600 per family plus a 50% cost share.

Get an authorization number and WRITE IT DOWN. Make note of the following information.

- ★ Date of Service
- ★ Name of Facility/Provider
- ★ Address of Facility/Provider
- ★ Presenting Symptoms

After your appointment, contact the Health Care Finder to ensure the authorization process has been completed. Remember to use the nearest Military Treatment Facility if possible.

For more information visit:
www.tma.med.navy.mil
www.mytricare.com